Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Ohio	
Case number (If known):	Chapter you are filing under:  ✓ Chapter 7  Chapter 11  Chapter 12  Chapter 13

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your	Mathew First name	Rachel First name
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to	Gerald	Grinnell
	your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden	First name	First name
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or	xxx-xx- <u>6</u> <u>5</u> <u>3</u> <u>7</u>	xxx-xx- <u>5</u> <u>4</u> <u>7</u> <u>0</u>
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

Debtor	1	
Debtor	2	

 Mathew Rachel
 Gerald Grinnell

 First Name
 Middle Name

 Last Name

Case number	(if known)	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☑I have not used any business names or EINs.	☑I have not used any business names or EINs.				
	Include trade names and doing business as names	Business name	Business name				
		Business name	Business name				
		EIN	EIN				
		EIN — — — — —	<u>EIN</u>				
5.	Where you live		If Debtor 2 lives at a different address:				
		1565 Newnan Ave. Number Street	Number Street				
		Lakewood, OH 44107 City State ZIP Code	City State ZIP Code				
		<u>Cuyahoga</u> County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
		Number Street	Number Street				
		P.O. Box	P.O. Box				
		City State ZIP Code	City State ZIP Code				
6.	Why you are choosing <i>this</i> district to file for bankruptcy	Check one:	Check one:				
		<ul> <li>✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> <li>☐ I have another reason. Explain. (See 28 U.S.C. § 1408)</li> </ul>	<ul> <li>✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> <li>☐ I have another reason. Explain. (See 28 U.S.C. § 1408)</li> </ul>				
		· ·					

Debtor	1	
Debtor	2	

Mathew		Gerald	
Rachel		Grinnell	Case number (if known)
First Name	Middle Name	Last Name	Case Harriser (ii known)

Par	t 2: Tell the Court About Yo	ur Bank	cruptcy Case					
7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form B		scription of each, see the top of page 1 an			342(b) for Individuals Filing for Ban	nkruptcy
8.	How you will pay the fee	abo orde	ut how you may pay.	Typically, if you are	paying the fee your	self, you may pa	office in your local court for more de ay with cash, cashier's check, or mor may pay with a credit card or check	ney
		√ Ine	ed to pay the fee in	n installments. If yo allments (Official Fo	u choose this option	n, sign and atta	ch the Application for Individuals to	Pay
		☐ I red but that	quest that my fee but is not required to, we applies to your fam	oe waived (You may vaive your fee, and m nily size and you are	request this option nay do so only if you unable to pay the fe	ur income is les ee in installment	filing for Chapter 7. By law, a judge is than 150% of the official poverty lings). If you choose this option, you muo and file it with your petition.	ne
		<b>✓</b> No.						
9.	Have you filed for bankruptcy within the last 8 years?	☐Yes.	District		When	// DD / YYYY	Case number	
			District		When		Case number	
					MN	// DD / YYYY		
			District		When MN	// DD / YYYY	Case number	
10.	Are any bankruptcy cases	<b>☑</b> No.						
	pending or being filed by a spouse who is not filing this	☐Yes.	Debtor				Relationship to you	
	case with you, or by a business partner, or by an affiliate?		District		When MM / I	DD / YYYY	Case number, if known	
			Debtor				Relationship to you	
			District				Case number, if known	
						DD / YYYY		
		□ No	Go to line 12.					
11.	Do you rent your residence?	_		d obtained an evictic	n judgment against	:you?		
		. 30	✓ No. Go to lin		,	• · ·		
			Yes. Fill out		out an Eviction Judg	ıment Against Y	ou (Form 101A) and file it as part	

Debtor 1 Debtor 2	Mathew Rachel		Gerald Grinnell	Case number (if know
	First Name	Middle Name	Last Namo	Case Humber (II know.

Par	t 3: Report About Any Busin	esse	es You Own as a Sole Pr	oprietor				
		<u>√</u>	No. Go to Part 4.					
12.	Are you a sole proprietor of any full- or part-time business?		Yes. Name and location of business.	ness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number Street					
			City		State	ZIP Code		
			Check the appropriate box to o	lescribe your busi	ness:			
			☐ Health Care Business (as	-				
			☐ Single Asset Real Estate		- ' ''			
			☐ Stockbroker (as defined in	11 U.S.C. § 101(5	53A))			
			☐ Commodity Broker (as def	ned in 11 U.S.C. §	§ 101(6))			
			☐ None of the above					
Par	of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	11 (	Bankruptcy Code.  Yes. I am filing under Chap Code.	chapter 11. oter 11, but I am N oter 11 and I am a	OT a small busines	ss debtor according to otor according to the de	the defini	tion in the
		Ò	No.					
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		Yes. What is the hazard?					
	hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is	needed, why is it r	needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number S	treet			
				City		State	9	ZIP Code

Debtor 1 Debtor 2 Mathew Rachel

First Name

Gerald Grinnell

Last Name

Case number (if known) \_

Part 5: Expla

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

Middle Name

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Debtor 2	Mathew Rachel		Gerald Grinnell	Case number (if known
	First Name	Middle Name	Last Name	Case Hamber (ii known

Par	t 6: Answer These Que	estions for	Reporting Purposes							
16.	What kind of debts do you	16a. u		onsumer debts? Consumer personal, family, or househol			1 U.	S.C. § 101(8) as "incurred by		
	have?		☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.		ousiness debts? Business de hrough the operation of the b		•		urred to obtain money for a		
			☐ No. Go to line 16c.	☐ No. Go to line 16c.						
			Yes. Go to line 17.	☐ Yes Go to line 17						
		16c.	State the type of debts you owe that are not consumer debts or business debts.							
17.	Are you filing under Chapt	er 7? 🔲	No. I am not filing under Chapter 7. Go to line 18.							
	Do you estimate that after any exempt property is excluded  Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					s excluded and administrative ditors?				
	and administrative expens are paid that funds will be available for distribution to unsecured creditors?		<ul><li>✓ No</li><li>☐ Yes</li></ul>							
		<b>√</b>	1-49 🔲 50-99	1,000-5,000 🗖 5,	,001	-10,000	2	5,001-50,000  50,000-100,000		
18.	How many creditors do you estimate that you owe?	u 🔲	100-199 🔲 200-999	10,001-25,000			M	lore than 100,000		
		<b>√</b>	\$0-\$50,000	□ \$1,000,001-\$10 m	nillior	n		\$500,000,001-\$1 billion		
19.	How much do you estimate	е 🔲	\$50,001-\$100,000	\$10,000,001-\$50	millio	on		\$1,000,000,001-\$10 billion		
	your assets to be worth?		\$100,001-\$500,000	\$50,000,001-\$100	) mill	lion		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million	\$100,000,001-\$50	00 m	illion		More than \$50 billion		
		Ą	\$0-\$50,000	\$1,000,001-\$10 m	nillior	n		\$500,000,001-\$1 billion		
20.	How much do you estimate	е 🔲	\$50,001-\$100,000	\$10,000,001-\$50	millio	on		\$1,000,000,001-\$10 billion		
	your liabilities to be?		\$100,001-\$500,000	\$50,000,001-\$100	) mill	lion		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million	\$100,000,001-\$50	00 m	illion		More than \$50 billion		
Par	7: Sign Below									
		have examine	d this petition, and I declare	under penalty of perjury that t	the in	nformation provide	ad is	strue and correct		
	If	I have choser	n to file under Chapter 7, I ar	. , , , ,	if eliç	gible, under Chapt	er 7	, 11,12, or 13 of title 11, United States		
				oresents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have ad the notice required by 11 U.S.C. § 342(b).						
I request relief i			in accordance with the chap	oter of title 11, United States 0	Code	e, specified in this	pet	ition.		
			naking a false statement, concealing property, or obtaining mes up to \$250,000, or imprisonment for up to 20 years, or bo			money or property by fraud in connection with a bankruptcy case poth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		X /s/ Mat	hew Gerald		X	/s/ Rachel Grinnell				
		•	Gerald, Debtor 1	•	ا	Rachel Grinnell, Debtor 2				
		Executed	d on 04/03/2019	-	ı	Executed on 04/03				
MM/ DD/ YYYY						IMI	VI/	DD/ YYYY		

Debtor 2 Rachel		
Debitor 2 Nacriei	Grinnell	Case number (if kn

eptor 2	Racnei	Grinnell		Case number (if known)
	First Name	Middle Name	Last Name	Odde Hallber (ii Mown)
F		l the ottomov fo	r the debter(e) nemed in this n	netition declars that I have informed the debter(s) shout distribit, to present
For your attorney, if you are represented by one		under Chapter 7	, 11, 12, or 13 of title 11, United	etition, declare that I have informed the debtor(s) about eligibility to proceed I States Code, and have explained the relief available under each chapter for have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and,
If you are not represented by an attorney, you do not need to file this		in a case in whic		y that I have no knowledge after an inquiry that the information in the schedules
page.		·		

/s/ Erin Allene Downs	Date <u>04/03/2019</u>
Erin Allene Downs, Attorney	MM / DD / YYYY
Erin Allene Downs	
Printed name	
Downs Legal Services	
Firm name	
124 Middle Ave. 700	
Number Street	
Elyria	OH 44035
City	State ZIP Code
Contact phone (440) 213-2760	Email addrass downslawmail@amail.co
Contact phone <u>(440) 213-2760</u>	Email address downslawmail@
081207	<u>OH</u>
Bar number	State

Fill in this information	Fill in this information to identify your case and this filing:					
Debtor 1	Mathew		Gerald			
	First Name	Middle Name	Last Name			
Debtor 2	Rachel		Grinnell			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	1	Northern District of Ohio			
Case number						

### Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

<ul><li>✓ No. Go to Part 2.</li><li>✓ Yes. Where is the property?</li></ul>			
Street address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> Creditors Who Have Claims Secured by Property.	
	<ul><li>☐ Condominium or cooperative</li><li>☐ Manufactured or mobile home</li><li>☐ Land</li></ul>	Current value of the entire property?	Current value of the portion you own?
City State ZIP Code	<ul><li>☐ Investment property</li><li>☐ Timeshare</li><li>☐ Other</li></ul>	Describe the nature of your ownership interest (sur as fee simple, tenancy by the entireties, or a life	
County	Who has an interest in the property? Check one.  Debtor 1 only	estate), if known.	
	<ul> <li>Debtor 2 only</li> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors and another</li> </ul>	Check if this is comr (see instructions)	nunity property

Debtor 1 Debtor 2	Mathew Rachel		Gerald Grinnell		
Jebioi Z	First Name	Middle Name	Last Name	Case number (if known)	
Part 2: De	scribe Your Vel	nicles			
dit 2. De	Scribe rour ver	licics			
			n any vehicles, whether they are registered or not? also report it on Schedule G: Executory Contracts and		
ou own that s	omeone eise anves.	. Il you lease a verilcie,	also report it on <i>Scriedule G. Executory Contracts and</i>	) Oriexpired Leases.	
. Cars, van	s, trucks, tractors,	sport utility vehicles, r	notorcycles		
∐ No <b>√</b> 1 Yes					
_					
3.1 Make:	[		Who has an interest in the property? Check one.  Debtor 1 only		aims or exemptions. Put the
Mode	el:	Ram	Debtor 2 only	amount of any secured class Creditors Who Have Class	
Year:			Debtor 1 and Debtor 2 only	Current value of the	Current value of the
Appro	oximate mileage:	145000	At least one of the debtors and another	entire property?	portion you own?
	information:		☐ Check if this is community property (see	\$3,600.00	\$3,600.00
Otriei	miornation.		instructions)		
			er recreational vehicles, other vehicles, and accesse aft, fishing vessels, snowmobiles, motorcycle accesso		
✓ No	s. Boato, trancro, rrie	noro, personal wateron	an, norming vessels, shewmobiles, meterbyole decesses	лоо	
Yes					
i. Add the o	dollar value of the i	portion you own for a	l of your entries from Part 2, including any entries	for pages	
			eregary		<b>→</b> \$3,600.00
Part 2: Do	coribo Vour Dor	reanal and Haucah	and Itoms		
Part 3: De	scribe Your Per	sonal and Housel	noid items		
Do you own	or have any legal o	or equitable interest in	any of the following items?		Current value of the
					portion you own?  Do not deduct secured
					claims or exemptions.
. Househol	ld goods and furni	shings			
Examples:	Major appliances	s, furniture, linens, chin	a, kitchenware		
☐ No		Furniture Fte			]
✓ Yes. D	escribe	Furniture, Etc.			\$1,200.00
. =1					_
. Electronic		radiae: audia vidae et	proc. and digital aguinment; computers, printers, again	anora: music collections:	
Examples:			ereo, and digital equipment; computers, printers, scan , cameras, media players, games	mers, music collections,	
☐ No		O-11 Dh TV 51-			1
🗹 Yes. D	escribe	Cell Phone, TV, Etc.			\$750.00
0-11- 411 *	f.,-l				
	es of value	urinos: pointingo printa	or other artworks books, pictures, or other cat shipst	0.	
Examples:			<ul><li>or other artwork; books, pictures, or other art object</li><li>other collections, memorabilia, collectibles</li></ul>	٥,	
<b>√</b> No	•••		·		1
	escribe				

Deb	tor 1	Mathew	Gerald		
Deb	tor 2	Rachel	Grinnell	Case number (if known)	
		First Name	Middle Name Last Name		
	<b></b>	f	-M.C.		
9.		for sports and h			
	Examples:		phic, exercise, and other hobby equipment; bicycles, pool tables, of	golf clubs, skis; canoes and kayaks;	
	_	carpentry tools; r	musical instruments		
	<b>☑</b> No				
	Yes. De	scribe			
10	Firearms				
10.		51.1.10			
	Examples:	Pistols, rifles, si	notguns, ammunition, and related equipment		
	<b>√</b> No				
	Yes. D	escribe			
11.	Clothes				
11.		En en eder ede de de	Construction and the design of the construction		
	Examples:	Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories		
	☐ No				\$500.00
	🗹 Yes. D	escribe			φ500.00
12.	Jewelry				
	Examples:	Evenyday jewelr	y, costume jewelry, engagement rings, wedding rings, heirloom je	awalny watches game gold silver	
		Lveryday jeweli	y, costaine jeweiry, engagement nings, wedding nings, neinoom je	ewelly, wateries, gerns, gold, silver	
	<b>✓</b> No				
	☐ Yes. D	escribe			
13.	Non-farm	animals			
	Examples:	Dogs, cats, bird	ds, horses		
	<b>√</b> No				
	_	escribe			
14.	Any other	personal and ho	usehold items you did not already list, including any health aid	ds you did not list	
	<b>√</b> No				
	_	escribe			
15.			of your entries from Part 3, including any entries for pages you		<b>***</b> 450.00
	for Part 3.	Write that numb	er here		\$2,450.00
Pai	rt 4: Desc	cribe Your Fin	ancial Assets		
· u	t 1. Bos.				
Do	you own o	r have any legal o	r equitable interest in any of the following?		Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
16.	Cash				
	Examples:	Money you have	e in your wallet, in your home, in a safe deposit box, and on hand w	then you file your petition	
	•	worldy you nav	o ir yodi. waliot, ir yodi nomo, ir a bale deposit box, and omnand w	Tion you lie your pouton	
	☐ No ☑ Yes			Cash	unknown
	· 162			Casi	<del>-</del>

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2		Mathew Rachel		Gerald Grinnell	Cope purpher (if I a a a a a
		First Name	Middle Name	Last Name	Case number (if known)
17.	Deposits of	monev			
	-	-	s, or other financial accounts	; certificates of deposit; share	es in credit unions, brokerage houses, and other
				ts with the same institution, lis	
	☐ No ☑ Yes				
			Institution name:		
17.1.	Checking acc	count:	Painesville Credit Union		
47.0	Observation				
17.2.	Checking acc	count:			<del></del>
172	Sovings soos	unt			
17.3.	Savings acco	urit.			
17 <i>/</i>	Savings acco	unt:			
17.4.	Savings acco	un.			<del></del>
17.5	Certificates o	f denosit:			
17.0.	· Cortinoatoo o	. аороок.			
17.6.	Other financia	al account:			
17.7.	Other financia	al account:			
17.8.	Other financia	al account:			
17.9.	Other financia	al account:			
10	Danda mut	ial frieda ar milh	aliahu tua dad ata aka		
10.			olicly traded stocks	ge firms, money market accour	inte
	✓ No		Arriorit docodino with brokerag	ge iimo, money manet accour	
	Yes				
19.		rtraded stock ar		and unincorporated busines	esses, including an interest in
	✓ No	• •			
	Yes. Give	specific			
	information	on about			
	them				
20.		_	_	e and non-negotiable instru	
				hecks, promissory notes, and or someone by signing or delive	
	<b>√</b> No		•		-
	Yes. Give				
	information them				
21.		or pension acco	unts		
		-		), thrift savings accounts. or c	other pension or profit-sharing plans
	<b>√</b> No	,		, , , , , , , , , , , , , , , , , , ,	

Official Form 106A/B Schedule A/B: Property page 4

Yes. List each account separately.

Debt	or 1	Mathew		Gerald						
Debt	or 2	Rachel		Grinnell	Case number (if known)					
		First Name	Middle Name	Last Name						
22.	Security depo	osits and prepayme	ents							
		Your share of all unused deposits you have made so that you may continue service or use from a company								
	Examples: Ag	reements with land	lords, prepaid rent, publi	c utilities (electric, gas, water),	telecommunications companies, or					
	✓ No ☐ Yes									
23.	Annuities (A									
	☑ No ☐ Yes									
24.	Interests in a	n education IRA, in	n an account in a qualif	ied ABLE program, or under	a qualified state tuition program.					
	26 U.S.C. §§	530(b)(1), 529A(b),	, and 529(b)(1).							
	✓ No ☐ Yes									
			-	any interests. 11 U.S.C. § 521(c						
25.	Trusts, equita benefit	able or future inter	ests in property (other t	than anything listed in line 1),	and rights or powers exercisable for your					
	<b>✓</b> No	.,,								
	Yes. Give informatio	specific n about them								
26.		_	s, trade secrets, and oth							
		nternet domain nan	nes, websites, proceeds	from royalties and licensing agr	reements					
	✓ No ☐ Yes. Give	specific								
	information about them									
27	Liaanaaa fua	nahiasa and athor	, ganaral intensibles							
27.			r general intangibles cclusive licenses, cooper	ative association holdings, liqu	or licenses.					
		professional license		anto accordano. Horanigo, nya	o. neo. eee,					
	☐ Yes. Give	•								
	informatio	n about them								
Mone	ey or property	owed to you?				Current value of the				
		•				portion you own? Do not deduct secured claims or exemptions.				
28.	Tax refunds o	owed to you								
	No Vos Give	e specific information	n about 2018		Fadami					
	then	n, including whether	ryou		Federal:	\$3,400.00				
		ady filed the returns years	and the		State:					
					Local:					
20	Com!les com	- u4								
29.	Examples:		m alimony, spousal supp	ort, child support, maintenance,	divorce settlement, property settlement					

Official Form 106A/B Schedule A/B: Property page 5

Debt		Mathew		Gerald		
Debt	or 2	Rachel First Name	Middle Name	Grinnell  Last Name	Case number (if known)	
	<b>□6</b> N -					
	✓ No ☐ Yes. G	Give specific information	on			
	_ 100.	ore openie i nemati			Alimony:	
					Maintenance:	
					Support:	
					Divorce settlement:	
					Property settlement:	
30.	Other amo	ounts someone owes	s vou			
	Examples:			nents, disability benefits, sick pay,	vacation pay, workers' compensation, Social	
	_		npaid loans you made			
	<b>☑</b> No					
	☐ Yes. C	Give specific information	on			
31.	Interests i	n insurance policies				
	Examples:	Health, disability, o	r life insurance; health	n savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	✓ No	lame the insurance co				
		f each policy and list i		pany name:	Beneficiary:	Surrender or refund value:
32.	-	est in property that is	-		ar are assurantly entitled to reacive property	
		omeone has died.	rig trust, expect proce	eas from a life insurance policy, c	or are currently entitled to receive property	
	<b>√</b> No					
	Yes. C	Sive specific information	on			
33.	Claims ag	ainst third parties, w	hether or not you ha	ve filed a lawsuit or made a den	nand for payment	
	Examples:	Accidents, employr	ment disputes, insura	nce claims, or rights to sue		
	□ No		Worker	's Compensation Claim		
	Yes. D	Describe each claim	VVOIKEI	s Compensation Claim		\$5,000.00
34.	Other con	tingent and unliquid	lated claims of every	nature, including counterclain	ns of the debtor and rights	
0	to set off		alou olumno or over,	Thataro, moraumy ocumerolam	ilo or tho dobtor and ngino	
	<b>√</b> No					
		Describe each claim				
35.	Any financ	cial assets you did no	t already list			
	<b>√</b> No					
	Yes. C	Give specific information	on			
36.				4, including any entries for pag		\$8,405.00
	ioi r'ait 4.	TTILE WALLENGTH	101 G		······································	Ψ0,+03.00

Official Form 106A/B Schedule A/B: Property page 6

Debt		Mathew	Gerald			
Debt	or 2	Rachel First Name	Middle Name	Grinnell Last Name	Case number (if known)	
		1 iist Name	Wildlie Hame	Last Name		
Par	t 5: Descri	be Any Busines	ss-Related Property	/ You Own or Have ar	n Interest In. List any real estate in Pa	rt 1.
37.	Do you own	or have any legal o	r equitable interest in an	ny business-related proper	ty?	
	✓No. Go to					
	Yes. Go to	line 38.				
						Current value of the
						Current value of the portion you own?
						Do not deduct secured claims or exemptions.
						ciains of exemptions.
38.	Accounts rec	ceivable or commis	sions you already earne	d		
	<b>√</b> No					
	Yes. Desc	cribe				
39.	Office equip	ment, furnishings,	and supplies			
	Examples: 1	Business-related co	mputers, software, mode	ms, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, electronic	devices
	<b>√</b> No					
	Yes. Desc	cribe				
40.	Machinery, fix	xtures, equipment,	supplies you use in bus	siness, and tools of your tr	rade	
	<b>√</b> No					
	Yes. Desc	cribe				
41.	Inventory					
	<b>√</b> No					
	Yes. Desc	cribe				
42.	Interests in r	partnerships or joi	nt ventures			
	<b>√</b> No	,				
	Yes. Desc	cribe				
43.	Customer lis  No	sts, mailing lists, or	other compilations			
		our lists include p	ersonally identifiable inf	ormation (as defined in 11	U.S.C. § 101(41A))?	
	_	No	,	(		
		Yes. Describe				
44.	Any business	s-related property y	ou did not already list			
	<b>√</b> No					
	Yes. Give					
	informatio	on				
45.				ncluding any entries for pa		
	for Part 5. W	rite that number h	ere			\$0.00
Par	t 6: Descri	be Anv Farm- ai	nd Commercial Fish	ing-Related Property	You Own or Have an Interest In.	
GI		-	est in farmland, list it in			

Official Form 106A/B Schedule A/B: Property page 7

Debt	or 2	Rachel	Grinnell	Case number (if known)_	
		First Name	Middle Name Last Name		
46.	Do you own of No. Go to ☐ Yes. Go to	Part 7.	egal or equitable interest in any farm- or commercial fishing-related propert	y?	
					Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	s			
	Examples: L	Livestock, pou	ltry, farm-raised fish		
	<b>√</b> No				
	Yes				
48.	Crops—eith	er growing o	r harvested		
	Yes. Give	specific			
	informatio				
49.	Farm and fish	hing equipme	ent, implements, machinery, fixtures, and tools of trade		
	<b>√</b> No				
	Yes				
50.	Farm and fish	hing supplies	s, chemicals, and feed		
	<b>√</b> No				
	Yes				
51.	Any farm- an	d commercia	l fishing-related property you did not already list		
	<b>√</b> No				
	Yes. Give	specific			
	informatio	n			
52.	Add the dolla	ar value of all	of your entries from Part 6, including any entries for pages you have attach	ned	
			ber here		\$0.00
Par	t 7: Descri	ibe All Prop	perty You Own or Have an Interest in That You Did Not List	Above	
		_			
53.			ty of any kind you did not already list?		
		Season tickets	s, country club membership		
	<b>√</b> No				
	Yes. Give information				
	IIIIOIIIIalio	Л 1			
<b>5</b> 4	۸ dd 4ba طعاله	ar value of all	of your entries from Bart 7. Write that number have		
54.	Auu trie dolla	aı value OI âll	of your entries from Part 7. Write that number here	<b>~</b>	\$0.00
Par	t 8:   ict th	na Totals o	f Each Part of this Form		
a	LISE HI	ic rotais 0	r Euch rait Ortilla FOITI		

Gerald

Debtor 1

Mathew

Official Form 106A/B Schedule A/B: Property page 8

Debtor 1 Mathew Gerald Debtor 2 Rachel Grinnell Case number (if known). First Name Middle Name Last Name Part 1: Total real estate, line 2..... \$0.00 Part 2: Total vehicles, line 5 \$3,600.00 56. Part 3: Total personal and household items, line 15 \$2,450.00 58. Part 4: Total financial assets, line 36 \$8,405.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$14,455.00 Copy personal property total -> \$14,455.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Fill in this information t	to identify your case:			
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel		Grinnell	
Spouse, if filing)	First Name	Middle Name	Last Name	
Inited States Bankru	ptcy Court for the:	1	Northern District of Ohio	
Case number (if known)				

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt					
<ol> <li>Which set of exemptions are you claiming? Che</li> <li>✓ You are claiming state and federal nonbankrupton.</li> <li>You are claiming federal exemptions. 11 U.S.C.</li> <li>For any property you list on Schedule A/B that you</li> </ol>	cy exemptions. 11 U.S.C. § . § 522(b)(2)	522(b)(3)				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
	Copy the value from Schedule A/B	Check only one box for each exemption.				
Brief description:  2006 Dodge Ram  Line from Schedule A/B:  3.1	\$3,600.00	\$0.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(2)			
Brief description: Painesville Credit Union Checking account  Line from Schedule A/B:17	\$5.00	\$3.75  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(13)			
3. Are you claiming a homestead exemption of more than \$170,350?  (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  I No  Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No  Yes						

Official Form 106C

Schedule C: The Property You Claim as Exempt

Debtor	1
Debtor	2

 Mathew
 Gerald

 Rachel
 Grinnell

 First Name
 Middle Name

 Last Name

Case number (i	f known)
0000	

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Federal tax  Line from Schedule A/B:28	\$3,400.00	\$3,400.00  100% of fair market value, up to any applicable statutory limit  \$0.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(9)(f)  Ohio Rev. Code Ann. §§ 2329.66(A)  (9)(g)
Brief description:  Worker's Compensation Claim  Line from  Schedule A/B: 33	\$5,000.00	\$5,000.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. §§ 2329.66(A) (9)(b), 4123.67

Fill ir	n this information to	identify your case:						
Deb	otor 1	Mathew		Gerald				
		First Name	Middle Name	Last Name	_			
Deb	otor 2	Rachel		Grinnell				
(Sp	ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States Bankrup	tcy Court for the:		Northern District of Ohio	)			
	se number nown)						Check if the amended	
Offi	icial Form	106D						
Sc	hedule D	: Creditor	s Who H	lave Claims	Secured	d by Prope	erty	12/15
<b>□</b>	No. Check this box	e information below.		our other schedules. You h	ave nothing else t	o report on this form.		
	each claim. If more	than one creditor ha	s a particular claim	cured claim, list the crediton, list the other creditors in to the creditor's name.	, ,	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Honor Finance		Describe t	the property that secures	the claim:	\$11,089.00	\$3,600.00	\$7,489.00
	Creditor's Name		2006 Doo	dge Ram				
	909 Davis Street S Number Stree							
	Evanston, IL 60201							
			As of the da	late you file, the claim is: Ch	eck all that apply.			
	City	State ZIP C		•	eck all that apply.			
·	Who owes the del			gent	eck all that apply.			
	Who owes the del		ode Conting	gent dated	eck all that apply.			
	Who owes the del	ot? Check one.	ode Conting Unliquid	gent dated	eck all that apply.			

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number 3 8 0 1

☐ Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here:

Other (including a right to offset)

Check if this claim relates to a

community debt

Date debt was incurred

10/7/2017

\$11,089.00

Debtor 1 Mathew Gerald
Debtor 2 Rachel Grinnell Case number (if known) =

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number

First Name Middle Name Last Name Column A Column C Column B Additional Page Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with portion that supports Do not deduct the 2.3, followed by 2.4, and so forth. this claim value of collateral. If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code State Unliquidated Who owes the debt? Check one. ■ Disputed Debtor 1 only Debtor 2 only Nature of lien. Check all that apply. Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Check if this claim relates to a ☐ Judgment lien from a lawsuit community debt Other (including a right to offset) Date debt was incurred Last 4 digits of account number \_\_\_\_\_

\$0.00

\$11,089.00

Debtor 1 Debtor 2	Mathew Rachel		Gerald Grinnell	Case number (if known) _
	First Name	Middle Name	Last Name	

Part 2: List Others to Be Notified for a Debt That You Already I	Listed
to collect from you for a debt you owe to someone else, list the creditor in Part 1	debt that you already listed in Part 1. For example, if a collection agency is trying , and then list the collection agency here. Similarly, if you have more than one shere. If you do not have additional persons to be notified for any debts in Part 1,
Westlake Portfolio Management Name P.O. Box 76809 Number Street	On which line in Part 1 did you enter the creditor?1  Last 4 digits of account number
Los Angeles, CA 90084 City State ZIP Code	<u> </u>

Debtor 1	Mathew		Gerald		
	First Name	Middle Name	Last Name		
Debtor 2	Rachel		Grinnell		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	ruptcy Court for the:		Northern District of Ohio		
Case number				[	Check if this is ar
(if known)					amended filing

#### Schedule E/F: Creditors who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule

D: Creditors Who Hold Claims Secured by Property. If more the Continuation Page to this page. On the top of any additi			es in the boxe	s on the left. Attach
Part 1: List All of Your PRIORITY Unsecured C	claims			
<ol> <li>Do any creditors have priority unsecured claims agains</li> <li>No. Go to Part 2.</li> <li>Yes.</li> </ol>	st you?			
identify what type of claim it is. If a claim has both priority a		iority and no	npriority amour	nts. As much as
		Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name  Number Street  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset? No Yes	When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or person injury while you were intoxicated Other. Specify			

Debtor 2	Rachel	Gi	innell		Case number (if known)	
	First Name	Middle Name La	ast Name		Case Hamber (II known)	
Part 2: Li	st All of Your NON	PRIORITY Unsecured Cl	aims			
3. Do any	creditors have nonprior	ity unsecured claims against y	ou?			
□ No.	You have nothing to repo	ort in this part. Submit this form t	the court v	with your other schedules.		
-4	• .	ore in this part Castrill this form t		man year earer contequies.		
<b>⊻</b> Yes.	•					
					claim. If a creditor has more than o	
					n it is. Do not list claims already inc	
	e creditor holds a particul	ar claim, list the other creditors i	n Part 3. If y	ou have more than three nonp	riority unsecured claims fill out the	Continuation Page of
Part 2.						
						Total claim
44						\$2,934.00
	ptance Now		Las	t 4 digits of account number	0211	ΨΞ,00 1100
Nonpri	ority Creditor's Name		Wh	en was the debt incurred?	06/01/2018	
		istomer Service / Bankruptcy	As	of the date you file, the claim i	s: Check all that apply.	
	Headquarters Dr			Contingent		
Numbe				Unliquidated		
	o, TX 75024		_	•		
City		State ZIP Code		Disputed		
Who i	incurred the debt? Che	eck one.	Тур	e of NONPRIORITY unsecure	d claim:	
Пр	ebtor 1 only			Student loans		
	ebtor 2 only			Obligations arising out of a se	paration agreement or	
	•			divorce that you did not report		
	ebtor 1 and Debtor 2 only	•		Debts to pension or profit-sha	ring plans, and other	
	t least one of the debtors		_	similar debts		
⊔ c	heck if this claim is for	a community debt	$\overline{\Delta}$	Other. Specify		
Is the	claim subject to offset	?		RentalAgreement		
<b>☑</b> N	•	•				
<b></b>	es					
4.2 Amer	rican Credit Acce		Las	t 4 digits of account number	1001	\$15,989.00
Nonpri	ority Creditor's Name		Wh	en was the debt incurred?	03/01/2016	
961 E	Main St					
Numbe				of the date you file, the claim i	s: Cneck all that apply.	
Spart	tanburg, SC 29302			Contingent		
City	<u> </u>	State ZIP Code	_	Unliquidated		
Who	incurred the debt? Che	ack one		Disputed		
		eck of le.	Тур	e of NONPRIORITY unsecure	ed claim:	
	ebtor 1 only			Student loans		
	ebtor 2 only			Obligations arising out of a se	paration agreement or	
<b><u>a</u></b> D	ebtor 1 and Debtor 2 only	y		divorce that you did not report	as priority claims	
☐ At	t least one of the debtors	and another		Debts to pension or profit-sha		
□ c	heck if this claim is for	a community debt		similar debts	51 ·	
le the	claim subject to offset	2	$\overline{\Delta}$	Other. Specify		
☑ N	•	•		Automobile		
<b> </b> Ye	es					
4.3 Capit	tal One		Las	t 4 digits of account number	2526	\$604.00
Nonpri	ority Creditor's Name			_	06/01/2018	
15000	0 Capital One Dr					
Numbe			_	of the date you file, the claim i	s: Cneck all that apply.	
Rich	mond, VA 23238			Contingent		
City	•	State ZIP Code		Unliquidated		
Who	inaurrad the debt? Cha	ack and		Disputed		
_	incurred the debt? Che	TON UITE.	Typ	e of NONPRIORITY unsecure	ed claim:	
	ebtor 1 only			Student loans		
_	ebtor 2 only			Obligations arising out of a se	paration agreement or	
<b>□</b> D	ebtor 1 and Debtor 2 only	у	_	divorce that you did not report		
☐ At	t least one of the debtors	and another		Debts to pension or profit-sha		
□с	heck if this claim is for	a community debt	_	similar debts	5 F, 5 5	
		•		Other. Specify		
	claim subject to offset	:		CreditCard		
☐ Ye	es					

Gerald

Debtor 1

Mathew

Debtor 1
Debtor 2

Mathew Gerald Rachel Grinnell

Last Name

First Name Middle Name

Part 2:	Your	NONPRIORIT	Y Unsecured	Claims -	Continuation	Page
						- 3

Afte	listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.4	Credit Collection Services	Last 4 digits of account number 6222	\$76.00
	Nonpriority Creditor's Name	When was the debt incurred? 06/23/2014	
	725 Canton St.	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Norwood, MA 02062 City State ZIP Code	Unliquidated	
	,	☐ Disputed	
	Who incurred the debt? Check one.	·	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No	UnknownLoanType	
	☐ Yes		
4.5	Credit Collection Services	Last 4 digits of account number 9569	\$120.00
	Nonpriority Creditor's Name	When was the debt incurred? 09/01/2015	
	725 Canton St. Number Street	As of the date you file, the claim is: Check all that apply.	
	Norwood, MA 02062	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	_	<ul> <li>Debts to pension or profit-sharing plans, and other</li> </ul>	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	☑ Other. Specify CollectionAttorney	
	<b>☑</b> No	CollectionAttorney	
	☐ Yes		****
4.6	Dfas-cl Indianapolis	Last 4 digits of account number 6537	\$329.00
	Nonpriority Creditor's Name	When was the debt incurred? 12/01/2015	
	Attn: Customer Service Dept 3300	As of the date you file, the claim is: Check all that apply.	
	8899 E 56 St Number Street	— Contingent	
	Indianapolis, IN 46249	☐ Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	☐ Student loans	
		Obligations arising out of a separation agreement or	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
		Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?	GovernmentOverpayment	
	<b>√</b> No		
	☐ Yes		

Dе	btor	1
٦,	htor	2

Mathew Gerald Rachel Grinnell

First Name Middle Name Last Name

Part 2:	Your NONPRIORITY	' Unsecured Claims -	Continuation Page

Afte	listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.7	Diversified Consultants, Inc.	Last 4 digits of account number 3585	\$237.00
	Nonpriority Creditor's Name	When was the debt incurred? 11/06/2018	
	Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
	PO Box 551268	— Contingent	
	Number Street	☐ Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	☐ Student loans	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or</li> </ul>	
		divorce that you did not report as priority claims	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other</li> </ul>	
		similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify CollectionAttorney	
	Is the claim subject to offset?	Concountationary	
	☑ No		
	Yes		•
4.8	Dominion Energy Ohio	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 5759  Number Street	As of the date you file, the claim is: Check all that apply.	
	Cleveland, OH 44101	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul> <li>Debts to pension or profit-sharing plans, and other</li> </ul>	
	Is the claim subject to offset?	similar debts	
	✓ No	☑ Other. Specify	
	☐ Yes		
4.0			\$80.00
4.9	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number 7022	<del></del>
	Attn: Bankruptcy	When was the debt incurred? 06/01/2017	
	8014 Bayberry Road	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Jacksonville, FL 32256	Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 only	☐ Student loans	
	☐ Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☑ Debtor 1 and Debtor 2 only		
	$oldsymbol{\square}$ At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	☐ Check if this claim is for a community debt	✓ Other. Specify	
	Is the claim subject to offset?	CollectionAttorney	
	☑ No		
	☐ Yes		

Debtor 1	
Debtor 2	

Mathew Gerald Rachel Grinnell

irst Name	Middle Name	Last Name
ii ot i vaiii c	Middle Hairie	Lastivanic

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Pag	Part 2:
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Afte	r listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.10	First Federal Credit Control	Last 4 digits of account number 6454	\$310.00
	Nonpriority Creditor's Name	When was the debt incurred? 02/01/2013	
	Attn: Bankruptcy Attn: Bankruptcy	As of the date you file, the claim is: Check all that apply.	
	24700 Chagrin Blvd , Ste 205 Number Street	Contingent	
	Cleveland, OH 44122	Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 only	Student loans	
	☐ Debtor 2 only	Obligations arising out of a separation agreement or	
	☑ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	Check if this claim is for a community debt	☑ Other. Specify CollectionAttorney	
	Is the claim subject to offset?  ✓ No	·	
	☑ No ☐ Yes		
4.11	I C System Inc	Last 4 digits of account number 6674	\$212.00
	Nonpriority Creditor's Name	When was the debt incurred? 08/01/2018	
	Attn: Bankruptcy	<del></del>	
	P.O. Box 64378	As of the date you file, the claim is: Check all that apply.	
	Number Street	— Unitingent	
	St. Paul, MN 55164	Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	☐ Student loans	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify CollectionAttorney	
	Is the claim subject to offset?	••••••••••••••••••••••••••••••••••••••	
	Yes		<b></b>
4.12	North American Recovery	Last 4 digits of account number 3858	\$507.00
	Nonpriority Creditor's Name	When was the debt incurred? 02/01/2015	
	NAR, Inc	As of the date you file, the claim is: Check all that apply.	
	PO Box 271014 Number Street	— Contingent	
	Salt Lake City, UT 84127	☐ Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	☐ Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	☐ Check if this claim is for a community debt	<b>-</b>	
	•	<ul><li>Other. Specify</li><li>CollectionAttorney</li></ul>	
	Is the claim subject to offset?  ✓ No		
	Yes		
	u res		

Debtor 1 Debtor 2 Mathew Gerald Rachel Grinnell

Last Name

First Name Middle Name

art 2:	Your NONPRIORI	Y Unsecured	Claims - 0	Continuation	Page
					9 -

Afte	listing any entries on this page, number them beginning with	n 4.5, followed by 4.6, and so forth.	Total claim
4.13	Stuart-Lippman and Associates	Last 4 digits of account number	\$5,400.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	5447 E. 5th Street Suite 110  Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Tucson, AZ 85711 City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	☐ Yes		
4.14	The Illuminating Company Nonpriority Creditor's Name	Last 4 digits of account number	\$1,200.00
	76 South Main	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Akron, OH 44308	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	Student loans	
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No	Other. Specify	
	☐ Yes		
4.15	U.S. Department of Education	Last 4 digits of account number 3448	\$3,254.00
	Nonpriority Creditor's Name	When was the debt incurred? 12/01/2010	
	ECMC/Bankruptcy	As of the date you file, the claim is: Check all that apply.	
	PO Box 16408	Contingent	
	Number Street	☐ Unliquidated	
	Saint Paul, MN 55116-0408	Disputed	
	City State ZIP Code	·	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  ☑ Student loans	
	Debtor 1 only	_	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?	Educational	
	☑ No		
	☐ Yes		

Debtor 1 Debtor 2 Mathew Gerald Rachel Grinnell

Last Name

First Name Middle Name

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning wi	ith 4.5, followed by 4.6, and so forth.	Total claim	
4.16	U.S. Department of Education	Last 4 digits of account number 8020	\$2,406.00	
	Nonpriority Creditor's Name	When was the debt incurred? 12/01/2010		
	ECMC/Bankruptcy	As of the date you file, the claim is: Check all that apply.		
	PO Box 16408 Number Street	— Contingent		
	Saint Paul, MN 55116-0408	Unliquidated		
	City State ZIP Code	Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	Debtor 1 only	✓ Student loans		
	Debtor 2 only	Obligations arising out of a separation agreement or		
	☑ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims		
	At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>		
	☐ Check if this claim is for a community debt	Other. Specify		
	Is the claim subject to offset?	Educational		
	<b>☑</b> No			
	☐ Yes			
4.17	U.S. Department of Education	Last 4 digits of account number 3450	\$1,627.00	
	Nonpriority Creditor's Name	When was the debt incurred? 12/01/2010		
	ECMC/Bankruptcy	As of the date you file, the claim is: Check all that apply.		
	PO Box 16408	— Contingent		
	Number Street	☐ Unliquidated		
	Saint Paul, MN 55116-0408 City State ZIP Code	Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	Debtor 1 only	Student loans		
	Debtor 2 only	Obligations arising out of a separation agreement or		
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims		
	At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>		
	☐ Check if this claim is for a community debt	Other. Specify		
	Is the claim subject to offset?	Educational		
	☑ No			
	☐ Yes			
4.18		Land Addition of an arrow to record to a control of the control of	\$565.00	
4.10	Waypoint Resource Group  Nonpriority Creditor's Name	Last 4 digits of account number 9438	<del></del>	
	ATTN: Bankruptcy	When was the debt incurred? 12/01/2018		
	PO Box 1081	As of the date you file, the claim is: Check all that apply.		
	Number Street	— Unitingent		
	San Antonio, TX 78294	<ul><li>Unliquidated</li><li>Disputed</li></ul>		
	City State ZIP Code	Type of NONPRIORITY unsecured claim:		
	Who incurred the debt? Check one.	Student loans		
	Debtor 1 only	<ul><li>Obligations arising out of a separation agreement or</li></ul>		
	Debtor 2 only	divorce that you did not report as priority claims		
	Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other		
	At least one of the debtors and another	similar debts		
	☐ Check if this claim is for a community debt	☑ Other. Specify CollectionAttorney		
	Is the claim subject to offset?	CollectionAttorney		
	<b>☑</b> No			
	Yes			

Debtor	1
Debtor	2

First Name

Mathew Gerald Rachel Grinnell

Middle Name

Case number (if known) _	
Case Hullibel (II kilowii) =	

\$37,050.00

Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claim** 6a. Domestic support obligations \$0.00 6a. **Total claims** from Part 1 6b. Taxes and certain other debts you owe the 6b. \$0.00 government 6c. Claims for death or personal injury while you \$0.00 6c. were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. 6d. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim** 6f. Student loans 6f. \$7,287.00 **Total claims** from Part 2 6g. Obligations arising out of a separation \$0.00 6g. agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and 6h. \$0.00 other similar debts 6i. Other. Add all other nonpriority unsecured claims. \$29,763.00 Write that amount here. 6j. Total. Add lines 6f through 6i.

Fill in this information to identify your case:				
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel		Grinnell	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		1	Northern District of Ohio	
Case number (if known)				

Check if this is an amended filing

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whor	n you hav	e the contract or lease	State what the contract or lease is for
2.1					
	Name				<del>-</del>
	Number	Street			-
	City		State	ZIP Code	-
2.2					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-
2.3					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-
2.4					
	Name				-
	Number	Street			_
	City		State	ZIP Code	-
2.5					
	Name				-
	Number	Street			-
	City		State	ZIP Code	-

Official Form 106G

Fill in this informat	ion to identify your case:				
Debtor 1	Mathew		Gerald		
	First Name	Middle Name	Last Name		
Debtor 2	Rachel		Grinnell		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:		Northern District of Ohio		
Case number (if known)				☐ Check if t amended	
Official Fo	rm 106H e H: Your Co	ndobtors			
<u>scriedule</u>	e n. Your Co	Juentoi S			12/15
ooth are equally re he left. Attach the	esponsible for supplying Additional Page to this	g correct information page. On the top of	n. If more space is needed, co any Additional Pages, write y	uplete and accurate as possible. If two married people ppy the Additional Page, fill it out, and number the end our name and case number (if known). Answer every	ries in the boxes on
1. <b>Do you nave</b> a  ✓ No  ☐ Yes	any codeptors? (If you a	are filing a joint case, o	do not list either spouse as a co	odebtor.)	
2. Within the las	t <b>8 years, have you live</b> d vada, New Mexico, Puert			nmunity property states and territories include Arizona, (	California, Idaho,
☑ No. Go to li	ne 3.				
Yes. Did yo	ur spouse, former spous	e, or legal equivalent	live with you at the time?		
□No					
☐ Yes. In v	which community state or	r territory did you live?		Fill in the name and current address of that pers	
					on.
Name					on.

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

ZIP Code

State

City

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

Schedule D, line
Schedule E/F, line
Schedule E/F, line
City
State ZIP Code

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Fill	in this information to	identify your cas	e:						
D	ebtor 1	Mathew		Gerald					
		First Name	Middle Name	Last Name					
	ebtor 2	Rachel		Grinnell					
(8	Spouse, if filing)	First Name	Middle Name	Last Name				Check if this is:	
U	nited States Bankrup	tcy Court for the:	N	orthern District o	f Ohio			An amended f	· ·
_	ase number _ known)								showing postpetition ome as of the following date:
								MM / DD / YY	YY
Эf	ficial Form	106I							
	chedule I:		come						12/15
nfo po dd	rmation. If you are r use is not filing with	narried and not you, do not inc our name and ca	filing jointly, and your s	spouse is living wi your spouse. If m	ith you, inc nore space	lude infor	rmation abou	are equally responsible for t your spouse. If you are separate sheet to this form	separated and your
1.	Fill in your employs information.	ment		Debte	or 1			Debtor 2 or no	on-filing spouse
	If you have more that attach a separate pa	•	Employment status	<b>☑</b> Employ	/ed Not	Employed		☐ Employed <b>☑</b> No	t Employed
	information about ac employers.	dditional	Occupation	Labor					
	Include part time, se self-employed work.		Employer's name	L.M.R. Co	nstruction.	, Inc.			
	Occupation may inc		Employer's address	13271 Bas Number S	ss Lake Rd. Street			Number Street	
	or homemaker, if it a								
				Chardon, City	OH 44024	State	Zip Code	City	State Zip Code
			How long employed	there? 8 months		_			
Pa	art 2: Give Deta	ils About Mor	nthly Income						
	Estimate monthly i are separated.	ncome as of the	date you file this form	. If you have nothin	g to report	for any line	e, write \$0 in t	he space. Include your nor	n-filing spouse unless you
	•	• .	more than one employer	, combine the infor	mation for a	ıll employe	ers for that per	son on the lines below. If y	ou need more space,
	·					Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
2.			nd commissions (before late what the monthly wa		2.		\$4,571.67	\$0.00	
3.	Estimate and list m	nonthly overtime	рау.		3	<b>-</b>	\$0.00	+\$0.00	

Official Form 106l Schedule I: Your Income page 1

\$4,571.67

\$0.00

4. Calculate gross income. Add line 2 + line 3.

Debtor 1 Debtor 2 MathewGeraldRachelGrinnellFirst NameMiddle NameLast Name

Case number (if known)			
Case number (It known)	O	('61	
	Case number	(IT KNOWN)	

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$4,571.67	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,020.76	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$272.31	\$0.00	
	5h. Other deductions. Specify: See additional page	5h.	+ \$508.86	+ \$0.00	
6.	<b>Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$1,801.93	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,769.74	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts,				
	ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive	ос.			
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+ \$0.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,769.74	+ \$0.00	\$2,769.74
11.	State all other regular contributions to the expenses that you list in Schedule .	J.			
	Include contributions from an unmarried partner, members of your household, your differends or relatives.	depende	ents, your roommates, ar	nd other	
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expenses listed in	n Schedule J.	
	Specify:				+ \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result amount on the Summary of Your Assets and Liabilities and Certain Statistical Information		•	me. Write that 12	. \$2,769.74
	•	•			Combined
					monthly income
13.					
	<b>√</b> No.				
	Yes. Explain:				

Debtor 1 Debtor 2 
 Mathew
 Gerald

 Rachel
 Grinnell

 First Name
 Middle Name
 Last Name

	Amount
5h. Other Deductions For Debtor 1	
<u>V</u> ac	\$264.33
Building Fund	\$66.08
Market Advancement Program	\$178.45

Fil	l in this information to	identify your case:				
D	ebtor 1	Mathew First Name	Gerald  Middle Name Last Name		and if this is	
_	Johtor 2				neck if this is:  An amended filing	
	Debtor 2 Spouse, if filing)	Rachel First Name	Middle Name Last Name		A supplement showing	postpetition
L	Inited States Bankrup	tcy Court for the:	Northern Distric		chapter 13 income as o	
_	case number _ f known)				MM / DD / YYYY	
O	fficial Form	106J				
S	chedule J	: Your Ex	penses			12/15
nee Pa	Describe  Is this a joint case  No. Go to line 2.	sheet to this form. Your Household ?	f two married people are filing togon the top of any additional pages			
	✓No	or 2 live in a separa	ite household? ficial Form 106J-2, <i>Expenses for Se</i>	parate Household of Debtor 2.		
2.	Do you have depe	ndents?	□No			
	Do not list Debtor 1 Debtor 2.		☑Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the dep	pendents' names.	each dependent	Child		- □ No. ☑ Yes. □ No. □ Yes.
						☐ No. ☐ Yes.
						□ No. □ Yes.
						□No. □Yes.
3.	Do your expenses of people other the your dependents?	an yourself and	<b>☑</b> No □ Yes			
Pa	art 2: Estimate	Your Ongoing M	onthly Expenses			
th	e bankruptcy is filed	. If this is a supplen	uptcy filing date unless you are usinental <i>Schedule J</i> , check the box a	at the top of the form and fill in th		port expenses as of a date after
			government assistance if you kno Sc <i>hedule I: Your Income</i> (Official F		You	ur expenses
4.	The rental or home ground or lot.	e ownership expens	es for your residence. Include first	mortgage payments and any rent f	or the 4	\$800.00
	If not included in li	ine 4:				
	4a. Real estate taxe	s			4a	\$0.00
	4b. Property, homeo	owner's, or renter's i	nsurance		4b	\$0.00

Official Form 106J Schedule J: Your Expenses page 1

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

4c.

4d.

\$50.00

\$0.00

Debtor 1 Debtor 2 MathewGeraldRachelGrinnellFirst NameMiddle NameLast Name

			Your expenses
5. <b>A</b>	dditional mortgage payments for your residence, such as home equity loans	5.	
6. <b>U</b>	tilities:		
6	a. Electricity, heat, natural gas	6a.	\$300.00
61	b. Water, sewer, garbage collection	6b.	\$0.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$150.00
6	d. Other. Specify:	6d.	\$0.00
7. <b>F</b>	ood and housekeeping supplies	7.	\$1,128.00
3. <b>C</b>	hildcare and children's education costs	8.	\$0.00
9. <b>C</b>	lothing, laundry, and dry cleaning	9.	\$185.00
10. <b>P</b>	ersonal care products and services	10.	\$71.00
11. <b>IV</b>	ledical and dental expenses	11.	\$0.00
	ransportation. Include gas, maintenance, bus or train fare. to not include car payments.	12.	\$0.00
3. <b>E</b>	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. <b>C</b>	haritable contributions and religious donations	14.	\$0.00
	o not include insurance deducted from your pay or included in lines 4 or 20.		
1:	5a. Life insurance	15a.	\$0.00
1:	5b. Health insurance	15b.	\$0.00
1:	5c. Vehicle insurance	15c.	\$75.00
1	5d. Other insurance. Specify:	15d.	\$0.00
6. <b>T</b> a	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.  pecify:	16.	\$0.00
7. <b>I</b> n	stallment or lease payments:		
1	7a. Car payments for Vehicle 1	17a.	\$361.00
1	7b. Car payments for Vehicle 2	17b.	
1	7c. Other. Specify:	17c.	
1	7d. Other. Specify:	17d.	
	our payments of alimony, maintenance, and support that you did not report as deducted om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
	ther payments you make to support others who do not live with you.	40	<b>#</b> 0.00
	pecify:	19.	\$0.00
.0. <b>O</b>	ther real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20	Da. Mortgages on other property	20a.	\$0.00
20	Ob. Real estate taxes	20b.	\$0.00
20	Oc. Property, homeowner's, or renter's insurance	20c.	\$0.00
20	Od. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	De. Homeowner's association or condominium dues  Form 106J Schedule J: Your Expenses	20e.	\$0.00

Debtor 1 Debtor 2	Mathew Rachel		Gerald Grinnell	Case number (if known	)
	First Name	Middle Name	Last Name		
21. <b>Other.</b> Spe	cify:			21. +	\$0.00
22. Calculate y	our monthly expen	ses.			
22a. Add lir	nes 4 through 21.			22a	\$3,120.00
22b. Copy I	line 22 (monthly expe	enses for Debtor 2), if any,	from Official Form 106J-2	22b	\$0.00
22c. Add lin	ne 22a and 22b. The	result is your monthly exp	enses.	22c	\$3,120.00
3. Calculate y	your monthly net in	come.			
23a. Copy I	line 12 (your combine	ed monthly income) from S	Schedule I.	23a	\$2,769.74
23b. Copy y	your monthly expens	es from line 22c above.		23b	\$3,120.00
23c. Subtra	act your monthly expe	enses from your monthly in	come.		(\$250.26 <u>)</u>
The r	esult is your <i>monthl</i> y	net income.		23c	(\$350.26)
4. Do you exp	pect an increase or	decrease in your expens	es within the year after you file this f	form?	
			an within the year or do you expect yo modification to the terms of your mor		
<b>√</b> No. ☐ Yes.	None				

Fill in this information	to identify your case:			
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel		Grinnell	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:		Northern District of Ohio	
Case number (if known)				

# Check if this is an amended filing

#### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B.</i> 1c. Copy line 63, Total of all property on <i>Schedule A/B.</i>	\$14,455.00 \$14,455.00
Part 2: Summarize Your Liabilities	
Part 2. Summanze four Liabilities	Your liabilities
	Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$11,089.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)      3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$37,050.00
Part 3: Summarize Your Income and Expenses	\$48,139.00
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$2,769.74
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$3,120.00

Debtor	1	
Debtor	2	

Gerald Mathew Rachel Grinnell First Name Middle Name Last Name

Case number (if known) _	

Da	rt	1	

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court w  Yes	vith your other schedules.	
<ul> <li>7. What kind of debt do you have?</li> <li>✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarifamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. §</li> <li>✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this form to the court with your other schedules.</li> </ul>	§ 159.	
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Offici Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ial	\$3,595.97
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$7,287.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00	
9g. <b>Total</b> . Add lines 9a through 9f.	\$7,287.00	

Fill in this information	to identify your case:			
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel	Grinnell		
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Northern District of Ohio	
Case number (if known)				
,				

### Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did un a como do mor a como como unha in NG	
	OT an attorney to help you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have rea	ad the summary and schedules filed with this declaration and that they are true and correct.
X /s/ Mathew Gerald	/s/ Rachel Grinnell
Mathew Gerald, Debtor 1	Rachel Grinnell, Debtor 2
Date 04/03/2019	Date 04/03/2019
MM/ DD/ YYYY	MM/ DD/ YYYY

Fill in this information	to identify your case:			
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel		Grinnell	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Northern District of Ohio	
Case number (if known)				

### Official Form 107

Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

page 1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Married					
Not married					
uring the last 3 years, l	have you lived anywhere	other than where you live n	now?		
<b>∕</b> Í No					
Yes. List all of the place	ces you lived in the last 3 y	rears. Do not include where y	ou live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		☐ Same as Debtor 1
		From			_ From
umber Street		To	Number Street		To
ity	State ZIP Code	<u></u>	City	State ZIP Code	_
			☐ Same as Debtor 1		Same as Debtor 1
		From			From
umber Street		To	Number Street		To
ity	State ZIP Code	_	City	State ZIP Code	_

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ebtor 1 ebtor 2	Mathew Rachel	Gerald Grinnell		Case number (if kno	)	
22.0	First Name Middle			case Hallisof (ii kilowi)		
nclude Arizo	e last 8 years, did you ever live w ona, California, Idaho, Louisiana, I	Nevada, New Mexico, Puerto F	Rico, Texas, Washington, and V		ity property states and territorie	
☐ Yes. N	Make sure you fill out <i>Schedule H:</i>	Your Codebtors (Official Form	106H).			
art 2: Ex	xplain the Sources of Your	Income				
Fill in the tot	nave any income from employmental amount of income you received ng a joint case and you have incor	I from all jobs and all businesse	es, including part-time activities			
☐ No						
<b>√</b> Yes. F	Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income	Gross Income	Sources of income	Gross Income	
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)	
	nuary 1 of current year until the filed for bankruptcy:	☑ Wages, commissions, bonuses, tips	\$8,007.21	Wages, commissions, bonuses, tips	\$0.00	
adic you	med for built aptoy.	Operating a business		Operating a business		
	alendar year: 1 to December 31, 2018 )	✓ Wages, commissions, bonuses, tips	\$30,235.00	☐ Wages, commissions, bonuses, tips		
(carraar)	YYYY,	Operating a business		Operating a business		
	alendar year before that:  1 to December 31, 2017 )	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips		
(January	YYYY YYYY	Operating a business		Operating a business		
Include inco payments; p have income	eceive any other income during to me regardless of whether that inco- pensions; rental income; interest; do that you received together, list it of Fill in the details.	ome is taxable. Examples of <i>oth</i> ividends; money collected from	er income are alimony; child su			
		Debtor 1		Debtor 2		
		Sources of income	Gross income from each	Sources of income	Gross Income from each	
		Describe below.	source (before deductions and exclusions)	Describe below.	source (before deductions and exclusions)	
	nuary 1 of current year until the filed for bankruptcy:					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

	Mathew Rachel		Gerald Grinnell		Case number (i	known)
	First Name	Middle Name	Last Name		Case Hamber (A	
For last	calendar year:					
(January	1 to December 3	31, <u>2018</u> )			_	
					_	
For the	calendar year be	efore that:				
	1 to December 3	31, <u>2017</u> )			_	
		YYYY				
Part 3	ist Certain F	ayments You Made	· Refore You Filed	for Bankruntey		
6. Are eithe	er Debtor 1's or I	Debtor 2's debts primaril	y consumer debts?			
☐ No.		r 1 nor Debtor 2 has pri arily for a personal, famil			ined in 11 U.S.C. § 101(8) as	"incurred by an
				e. any creditor a total of \$6,82	5* or more?	
	☐ No. Go to li	ne 7.				
					ore payments and the total a ild support and alimony. Also	
		ments to an attorney for th				
	* Subject to ad	justment on 4/01/22 and (	every 3 years after that	for cases filed on or after th	e date of adjustment.	
<b>√</b> Yes.	Debtor 1 or De	ebtor 2 or both have pri	marily consumer deb	ots.		
		· · · · · · · · · · · · · · · · · · ·	-	any creditor a total of \$600	or more?	
	☑ No. Go to li	ne 7.				
	pay				amount you paid that creditor Also, do not include paymen	
				Total amount paid	Amount you still owe	
			Dates of payment	Total amount palu	Amount you sun owe	Was this payment for
				Total amount paid	Amount you sail one	
				Total alliquit palu	Autourit you suit one	Was this payment for  Mortgage Car
	Creditor's Name			Total alliount palu	Autourit you suit one	☐Mortgage
		at			Autourit you suit one	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Creditor's Name	ot .		Total alliquit paid	Autourit you suit one	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
	Creditor's Name	et State ZIP Code	payment	Total alliount paid	Autourit you suit one	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment

or 2	Rachel		Gerald Grinnell		Case r	number (if known	)
		iddle Name	Last Name	e		idinibel (ii kilowii	,
			Dates of payment	Total amount paid	Amount you still owe	Reason for the	s payment
nsider's Nar	ne	·-					
Number S	Street						
City	State ZIP	Code					
lude payme <b>√</b> No	ar before you filed for ban nts on debts guaranteed or all payments that benefited	cosigned by	an insider.  Dates of	ments or transfer any  Total amount paid	property on account of Amount you still owe	a debt that bendered a debt th	
			payment			Include creditor	's name
Insider's Nar	ne						
Number S	Street						
City	State ZIP	Code					
Within 1 yeast all such masputes.	ntify Legal Actions, F ar before you filed for ban atters, including personal in	nkruptcy, wei	e you a party in an	y lawsuit, court action			modifications, and contra
Within 1 yeast all such managements.  Monocentrical No.	ar before you filed for ban	nkruptcy, wei	e you a party in an	y lawsuit, court action			modifications, and contra
Within 1 yea at all such manaputes.	ar before you filed for ban atters, including personal in	nkruptcy, wei	e you a party in an	y lawsuit, court action s, divorces, collection s			modifications, and contra
Within 1 yea thall such ma sputes. ☑ No ☐ Yes. Fill i	ar before you filed for ban atters, including personal in	nkruptcy, wei	<b>e you a party in an</b> small claims actions	y lawsuit, court actions, divorces, collections	uits, paternity actions, su		Status of the case  Pending On appeal
Within 1 yeast all such mapputes.  ☑ No ☑ Yes. Fill i	ar before you filed for ban atters, including personal in n the details.	Natu	<b>e you a party in an</b> small claims actions	y lawsuit, court actions, divorces, collections	uits, paternity actions, su  urt or agency t Name		Status of the case
Within 1 yeast all such masputes.  ☑ No ☑ Yes. Fill i	ar before you filed for ban atters, including personal in n the details.	Natu	<b>e you a party in an</b> small claims actions	y lawsuit, court action s, divorces, collection s  Cou	uits, paternity actions, su  urt or agency t Name	pport or custody	Status of the case  Pending On appeal
Within 1 yeast all such masputes.  ☑ No ☑ Yes. Fill i	ar before you filed for ban atters, including personal in n the details.	Natu	<b>e you a party in an</b> small claims actions	y lawsuit, court action s, divorces, collection s  Court	uits, paternity actions, su urt or agency  Name per Street	pport or custody	Status of the case  Pending On appeal

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ebtor 1 ebtor 2	Mathew Rachel	Middle Nosse	Gerald Grinnell Last Name	Case number (if known)	
	First Name	Middle Name	Last Name		
10. Within 1 Check all th	1 year before you finat apply and fill in the	led for bankruptcy, v e details below.	was any of your property repossessed, foreclo	osed, garnished, attached, seized, or le	evied?
<b>√</b> No. G	o to line 11.				
Yes. F	Fill in the information	below.			
			Describe the property	Date	Value of the property
Creditor's	Name		-		
Number	Street		Explain what happened		
			Property was repossessed.		
			Property was foreclosed.		
			☐ Property was garnished.		
City	S	state ZIP Code	Property was attached, seized, or	· levied.	
√No	payment because you	ou owed a debt?	Describe the action the creditor took	Date action was taken	Amount
Creditor's	Name		_	tareii	
Number	Street		_		
City	St	ate ZIP Code	Last 4 digits of account number: XXXX		
	1 year before you fi custodian, or anoth		was any of your property in the possession o	f an assignee for the benefit of credite	ors, a court-appointed
<b>√</b> No					
Yes					
Part 5: L	ist Certain Gift	s and Contributi	ons		
13. Within 2	2 vears before you	filed for bankruptcy.	did you give any gifts with a total value of me	ore than \$600 per person?	
√INo	_ ,	,,,		no man çoco por porcon.	
	Fill in the details for e	each aift			
163.1	III III the details for t	saon girt.			
fficial Form	107	Sta	atement of Financial Affairs for Individuals F	iling for Bankruptcy	page <b>5</b>

ebtor 1 ebtor 2	Mathew Rachel	Gerald Grinnell	_ Case number (if know)	n)
	First Name Mide	dle Name Last Name		
Gifts wit person	th a total value of more than \$	600 per Describe the gifts	Dates you gave the gifts	Value
Person to	Whom You Gave the Gift			
Number	Street			
City	State ZIF	Code		
Person's r	relationship to you			
				.1.110
√No		nkruptcy, did you give any gifts or contributions with	i a total value of more than \$600 to an	y charity?
	ill in the details for each gift or			
	contributions to charities that are than \$600	t Describe what you contributed	Date you contributed	Value
Charity's N	lame			
Number	Street			
City	State ZIP Code			
art 6: Li	st Certain Losses			
	year before you filed for bank	rruptcy or since you filed for bankruptcy, did you los	se anything because of theft, fire, other	er disaster, or gambling?
<b>√</b> No				
	ill in the details.			
	e the property you lost and loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend insurance claims on line 33 of Schedule A/B: Property	ing	Value of property lost
icial Form 1	107	Statement of Financial Affairs for Individuals	Filing for Bankruptcy	page

Debtor 2	Rachel	Grinnell	Case number (if kn	own)
	First Name	Middle Name Last Name	·	·
Part 7: Lis	st Certain Payn	nents or Transfers		
seeking ban	kruptcy or preparir	ed for bankruptcy, did you or anyone else acting on ng a bankruptcy petition? y petition preparers, or credit counseling agencies fo		yone you consulted about
□No				
<b>√</b> Yes. Fi	II in the details.			
Downs L	egal Services	Description and value of any proper	ty transferred Date payment or transfer was made	Amount of payment
	no Was Paid	Attorney's Fee		
124 Middl Number	e Ave. 700 Street		4/3/2019	\$1,200.00
Number	Street			
Elyria, Ol	1 44035			
City		ZIP Code		
Email or w	ebsite address			
Person Wh	o Made the Paymen	t, if Not You		
	·			
✓No	II in the details.	ansfer that you listed on line 16.  Description and value of any proper	ty transferred Date payment or	Amount of payment
Person Wil	no Was Paid		transfer was made	
1 010011 111	10 1740 1 414			
Number	Street			
City	State	ZIP Code		
ordinary collinclude both Do not include	urse of your busine outright transfers ar	led for bankruptcy, did you sell, trade, or otherwise ss or financial affairs?  Ind transfers made as security (such as the granting of that you have already listed on this statement.		
Official Form 1	07	Statement of Financial Affairs for	Individuals Filing for Bankruptcy	page

Gerald

Debtor 1

Mathew

tor 2	Mathew Rachel		Gerald Grinnell	Case number	(if known)
.0	First Name	Middle Name	Last Name	Case number	(II KIIOWII)
		Descript transferi	tion and value of property red	Describe any property or payments or debts paid in exchange	Date transfer was made
Person Who	Received Transfer				
Number S	Street				
City	State ZIF	o Code			
Person's rela	ationship to you				
en called <i>as</i>	years before you filed set-protection device. In the details.	d for bankruptcy, di s.)	id you transfer any property t	o a self-settled trust or similar device of v	/hich you are a beneficiary?(These
		Descript	ion and value of the property	transferred	Date transfer was made
Name of trus	st		ion and value of the property	transferred	Date transfer was made
. Within 1 ye nsferred? clude checkin pperatives, a	Certain Financia	al Accounts, In or bankruptcy, were larket, or other finan	struments, Safe Depos e any financial accounts or in cial accounts; certificates of de	t Boxes, and Storage Units  struments held in your name, or for you posit; shares in banks, credit unions, broke	made
rt 8: List  . Within 1 yeansferred? clude checkinoperatives, a	Certain Financia ear before you filed fing, savings, money m	al Accounts, In or bankruptcy, were larket, or other finan	struments, Safe Depos e any financial accounts or in cial accounts; certificates of de	t Boxes, and Storage Units struments held in your name, or for you	made
Tt 8: List  Within 1 yeansferred? Clude checking operatives, and No	Certain Financia ear before you filed fing, savings, money massociations, and other	al Accounts, In or bankruptcy, were larket, or other financial institution	struments, Safe Depos e any financial accounts or in cial accounts; certificates of de	t Boxes, and Storage Units struments held in your name, or for you	r benefit, closed, sold, moved, or erage houses, pension funds,
rt 8: List  . Within 1 yeansferred? clude checking operatives, and with the second sec	Certain Financia ear before you filed fing, savings, money massociations, and other	al Accounts, In or bankruptcy, were narket, or other financer financial institution	struments, Safe Depos e any financial accounts or ir cial accounts; certificates of dens.	t Boxes, and Storage Units  struments held in your name, or for you  posit; shares in banks, credit unions, broke  Type of account or instrument  Date account closed, sold transferred  Checking	r benefit, closed, sold, moved, or erage houses, pension funds,  at was Last balance before closing or
nt 8: List  D. Within 1 yeansferred? Clude checkinoperatives, and No  Yes. Fill in	Certain Financia ear before you filed for the savings, money massociations, and other the details.	al Accounts, In or bankruptcy, were narket, or other financer financial institution	struments, Safe Depos e any financial accounts or in cial accounts; certificates of dens.	t Boxes, and Storage Units  struments held in your name, or for you posit; shares in banks, credit unions, broke  Type of account or instrument  Checking Savings Money market Brokerage	r benefit, closed, sold, moved, or erage houses, pension funds,  at was Last balance before closing or
nt 8: List  D. Within 1 yeansferred? Clude checkinoperatives, and No  Yes. Fill in	Certain Financia	al Accounts, In or bankruptcy, were narket, or other financer financial institution	struments, Safe Depos e any financial accounts or in cial accounts; certificates of dens.	t Boxes, and Storage Units  struments held in your name, or for your posit; shares in banks, credit unions, broke  Type of account or instrument  Date account closed, sold transferred  Checking  Savings  Money market	r benefit, closed, sold, moved, or erage houses, pension funds,  at was Last balance before closing or

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btor 2	Mathew	Gerald		
	Rachel First Name Mid	Grinnell  ddle Name Last Name	Case number (if known)	<u> </u>
1. Do you no	ow have, or did you have w	ithin 1 year before you filed for bankruptcy, any	safe deposit box or other depository for secu	urities, cash, or other
✓No				
Yes. Fill	I in the details.			
		Who else had access to it?	Describe the contents	Do you still have it?
				□No
Name of Fin	nancial Institution	Name		☐Yes
Number	Street	Number Street		
		City State ZIP Code		
City	State 7ID Code	— State ZIF Code		
City	State ZIP Code			
	ı stored property in a storaç	ge unit or place other than your home within 1 year	ear before you filed for bankruptcy?	
<b>☑</b> No				
Yes. Fill	I in the details.			
		Who else has or had access to it?	Describe the contents	Do you still have it?
				□No
Name of Sto	orage Facility	Name		☐Yes
Number	Street	Number Street		
Number	Oli Get	Number Street		
		City State ZIP Code		
City	State ZIP Code	<del></del>		
art 9: Id∈	entify Property You Ho	old or Control for Someone Else		
	old or control any property	that someone else owns? Include any property	you borrowed from, are storing for, or hold i	n trust for someone.
<b>√</b> No				
☐ Yes. Fill	I in the details.			

ebtor 1 ebtor 2	Mathew Rachel		Gerald Grinnell		0	
ebioi 2	First Name	Middle Nam			Case number (if	known)
		V	Where is the property?		Describe the property	Value
Owner's Nar	ne		anh an Otanat		_	
		Nu	mber Street			
Number	Street				_	
		Cit	y State	ZIP Code		
City	State ZIF	<sup>2</sup> Code				
2	in Detelle Alexand	. F				
Part 10: Gi	ve Details About	Environme	ental Information			
	ose of Part 10, the fo	•				
or materia					pollution, contamination, releases of haza uding statutes or regulations controlling the	
■ Site mean		, or property as	defined under any enviro	onmental law,	whether you now own, operate, or utilize it	or used to own, operate, or utilize it,
■ Hazardou	•	thing an enviro	nmental law defines as a	hazardous w	aste, hazardous substance, toxic substance	e, hazardous material, pollutant,
	•	roceedings th	at you know about, rega	ardless of who	en they occurred.	
24. Has any g	overnmental unit no	tified you that	you may be liable or po	tentially liabl	e under or in violation of an environmen	ital law?
✓No						
Yes. Fill	in the details.					
		Go	overnmental unit		Environmental law, if you know it	Date of notice
Name of site			annantal mit			
Name of site	•	Gov	ernmental unit			
Number	Street	Nun	nber Street			
		City	State ZIF	P Code		
City	State ZIF	O Code				
25 Have you	notified any govern	mental unit of :	any release of hazardou	ıs mətəriəl?		
✓ No	notined any governi	nental unit of a	arry release of riazardou	is material:		
	in the details.					
Yes. Fill	in the details.					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

btor 2	Mathew Rachel			rald innell	Case number (if	known)
	First Name	Middle Nam	e La	st Name	·	, 
		Go	vernmental un	it	Environmental law, if you know it	Date of notice
Name of si	ite	Gov	ernmental unit			
Number	Street	Nun	ber Street			
		City	Sta	ate ZIP Code		
City	State Z	IP Code				
26. Have yo ✓ No	ou been a party in any	judicial or adm	inistrative proc	eeding under any er	vironmental law? Include settlements and	l orders.
	ill in the details.					
		Co	urt or agency		Nature of the case	Status of the case
Case title		Cou	rt Name			Pending
						☐On appeal☐Concluded
		Nun	ber Street			Concluded
Case numl	ber	City	St-	ate ZIP Code		
		,				
art 11: (	Give Details Abou	ut Your Busir	ess or Conn	ections to Any E	Business	
						isiness?
7. Within 4	years before you file	ed for bankrupto	y, did you own	a business or have a	any of the following connections to any bu	isiness?
7. Within 4	years before you file	ed for bankrupto	y, did you own	a business or have a	any of the following connections to any bu	isiness?
7. Within 4	years before you file sole proprietor or self	ed for bankrupto -employed in a t iability company	y, did you own	a business or have a	any of the following connections to any bu	isiness?
7. Within 4	years before you file sole proprietor or self member of a limited li	ed for bankrupto -employed in a t iability company nip	ry, did you own or ade, profession (LLC) or limited	a business or have and or other activity, eith	any of the following connections to any bu	isiness?
7. Within 4	years before you file sole proprietor or self member of a limited li partner in a partnersh	ed for bankrupto -employed in a t iability company nip nanaging execut	rade, profession (LLC) or limited	a business or have a n, or other activity, eith liability partnership (l	any of the following connections to any bu	isiness?
27. Within 4	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m	ed for bankruptor- employed in a to iability company hip nanaging executions of the voting or	ry, did you own a rade, profession (LLC) or limited ve of a corporate equity securities	a business or have a n, or other activity, eith liability partnership (l	any of the following connections to any bu	isiness?
27. Within 4  A  A  A  A  A  No. No.	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5%	ed for bankruptor- employed in a transition in	rade, profession (LLC) or limited ve of a corporati equity securities	a business or have and a business or have and a corporation	any of the following connections to any bu	isiness?
27. Within 4  A  A  A  A  A  No. No	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applie	ed for bankruptor- employed in a translating company in ip the anaging execution of the voting or est. Go to Part 12, we and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities	a business or have and a business or have and a corporation	any of the following connections to any but er full-time or part-time  LP)  Employer Identification	number
27. Within 4  A  A  A  A  A  No. No	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applie	ed for bankruptor- employed in a translating company in ip the anaging execution of the voting or est. Go to Part 12, we and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities	a business or have and a business or have and a corporation or each business.	any of the following connections to any but er full-time or part-time	number
27. Within 4  A  A  A  A  A  VINO. No.	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applie	ed for bankruptor- employed in a translating company in ip the anaging execution of the voting or est. Go to Part 12, we and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities	a business or have and a business or have and a corporation or each business.	any of the following connections to any but er full-time or part-time  LP)  Employer Identification	number ecurity number or ITIN.
27. Within 4  A  A  A  A  A  VINO. No.	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applie	ed for bankruptor-employed in a triability company inip nanaging execution of the voting or es. Go to Part 12 eve and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities details below for escribe the nation	a business or have and a business or have and a corporation or each business.	er full-time or part-time  LLP)  Employer Identification Do not include Social S  EIN:	number ecurity number or ITIN.
27. Within 4	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applied theck all that apply about	ed for bankruptor-employed in a triability company inip nanaging execution of the voting or es. Go to Part 12 eve and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities details below for escribe the nation	a business or have and a business or have and a corporation or each business.	er full-time or part-time  LP)  Employer Identification Do not include Social S	number ecurity number or ITIN.
27. Within 4	e years before you file a sole proprietor or self a member of a limited li a partner in a partnersh an officer, director, or m an owner of at least 5% one of the above applied theck all that apply about	ed for bankruptor-employed in a triability company inip nanaging execution of the voting or es. Go to Part 12 eve and fill in the	rade, profession (LLC) or limited ve of a corporate equity securities details below for escribe the nation	a business or have and a business or have and a corporation or each business.	er full-time or part-time  LLP)  Employer Identification Do not include Social S  EIN:	number ecurity number or ITIN.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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otor 1	Mathew			Gerald				
tor 2	Rachel First Name	Middle	Name	Grinnell  Last Name		_ C	ase number (if know	/n)
. Within 2 other par		filed for bank	ruptcy, did yo	u give a financial s	tatement to anyo	ne about your bus	iness? Include all f	inancial institutions, creditor
otilei pai	rues.							
_	ill in the details bel	ow.						
_			Date issue	ed				
Name			MM / DD / YY					
Number	Street		_					
			-					
			_					
rt 12: 5	State Sign Below	ZIP Code						
rt 12: S	Sign Below the answers on the	is Statement king a false s	tatement, con		r obtaining mone	y or property by fra	aud in connection v	e answers are true and with a bankruptcy case
rt 12: Save read	Sign Below the answers on the nderstand that man n fines up to \$250,	is <i>Statement</i> king a false s 000, or impris	tatement, con onment for up	cealing property, o	r obtaining mone h. 18 U.S.C. §§ 15	y or property by fra 2, 1341, 1519, and	aud in connection v	
ave read rrect. I urn n result ir	Sign Below the answers on the nderstand that man n fines up to \$250,	is Statement king a false s 000, or impris	tatement, con- onment for up	cealing property, o	r obtaining mone h. 18 U.S.C. §§ 15	y or property by fra 2, 1341, 1519, and Rachel Grinnell	aud in connection v	
ave read rrect. I urn result in	Sign Below the answers on the derstand that man fines up to \$250,	is Statement king a false s 000, or impris	tatement, con- onment for up	cealing property, of to 20 years, or both	r obtaining mone h. 18 U.S.C. §§ 15 /s. nature of Rachel (	y or property by fra 2, 1341, 1519, and Rachel Grinnell	aud in connection v	
ave read rrect. I urn result in	the answers on the derstand that man fines up to \$250,	is Statement king a false s 000, or impris	tatement, con- onment for up	cealing property, of to 20 years, or both	r obtaining mone h. 18 U.S.C. §§ 15	y or property by fra 2, 1341, 1519, and Rachel Grinnell	aud in connection v	
ave read rrect. I urn result in Signa	the answers on the derstand that man fines up to \$250,  /s/ Mature of Mathew Go	is <i>Statement</i> king a false s 000, or impris lathew Gerald erald, Debtor 1	tatement, conconment for up	cealing property, of to 20 years, or both	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel (	y or property by fra 2, 1341, 1519, and Rachel Grinnell Grinnell, Debtor 2	aud in connection v	
ave read rrect. I urn result in Signa Date	the answers on the derstand that man fines up to \$250,  /s/ Mature of Mathew Go	is <i>Statement</i> king a false s 000, or impris lathew Gerald erald, Debtor 1	tatement, conconment for up	cealing property, of to 20 years, or both	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel (	y or property by fra 2, 1341, 1519, and Rachel Grinnell Grinnell, Debtor 2	aud in connection v	
ave read rrect. I urn result in Signa Date	the answers on the derstand that man fines up to \$250,  /s/ Mature of Mathew Go	is <i>Statement</i> king a false s 000, or impris lathew Gerald erald, Debtor 1	tatement, conconment for up	cealing property, of to 20 years, or both	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel (	y or property by fra 2, 1341, 1519, and Rachel Grinnell Grinnell, Debtor 2	aud in connection v	
ave read prect. I un result in Signa Date  d you atta	the answers on the derstand that man fines up to \$250,  /s/ Nature of Mathew Goto 04/03/2019	is Statement king a false s 2000, or impris	tatement, conconment for up	cealing property, of to 20 years, or both to 20 yea	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel ( e_04/03/2019	y or property by fra 2, 1341, 1519, and  Rachel Grinnell  Grinnell, Debtor 2  for Bankruptcy (O	aud in connection v	
rt 12: S  nave read orrect. I un result in Signal  Date  Id you atta	the answers on the derstand that man fines up to \$250,  /s/ Nature of Mathew Goto 04/03/2019	is Statement king a false s 2000, or impris	tatement, conconment for up	cealing property, of to 20 years, or both	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel ( e_04/03/2019	y or property by fra 2, 1341, 1519, and  Rachel Grinnell  Grinnell, Debtor 2  for Bankruptcy (O	aud in connection v	
nave read or rect. I un an result in Signal Date  id you atta  V No  Yes  id you pay	the answers on the derstand that man fines up to \$250,  /s/ Mature of Mathew Go 04/03/2019  ach additional pages of or agree to pay s	is Statement king a false sooo, or imprisooo, or imprisooo dathew Gerald Perald, Debtor 1	tatement, conconment for up	cealing property, of to 20 years, or both to 20 yea	/s. h. 18 U.S.C. §§ 15 /s. hature of Rachel ( e 04/03/2019 individuals Filing out bankruptcy f	y or property by fra 2, 1341, 1519, and  Rachel Grinnell  Grinnell, Debtor 2  for Bankruptcy (O	aud in connection v	vith a bankruptcy case  Preparer's Notice,

Fill in this information	to identify your case:			
Debtor 1	Mathew		Gerald	
	First Name	Middle Name	Last Name	
Debtor 2	Rachel		Grinnell	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:		Northern District of Ohio	
Case number (if known)				

## Check if this is an amended filing

#### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

o, o	o that you hold in that I of concuence of ore	editors Who Have Claims Secured by Property (Officia	i i omi 1005), ili ili ule ililorniduon belo
Identify the cred	ditor and the property that is collateral	What do you intend to do with the property that debt?	at secures a Did you claim the property a exempt on Schedule C?
Creditor's name:	Honor Finance	<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	<b>√</b> 1 No □ Yes
Description of property	2006 Dodge Ram	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:		Retain the property and [explain]:	

Debtor	1	
Debtor	2	

 Mathew
 Gerald

 Rachel
 Grinnell

 First Name
 Middle Name
 Last Name

Case number (if known) _	

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information
below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal
property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's name:		☐ No
Description of leased property:		☐ Yes
Lessor's name:		☐ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		☐ Yes
rt 3: Sign Below		
Under penalty of perjury, I declare that I have in s subject to an unexpired lease.	ndicated my intention about any property of my estate that secure	s a debt and any personal property that
/s/ Mathew Gerald	/s/ Rachel Grinnell	
Signature of Debtor 1	Signature of Debtor 2	
Date 04/03/2019	Date 04/03/2019 MM/ DD/ YYYY	

## United States Bankruptcy Court

Northern District of Ohio

In	re							
Ge	rald, Mathew				Ca	ase No		_
Gri	Grinnell, Rachel				Cł	napter	7	_
De	btor(s)							
		DISCLO	SURE OF CO	MPENSATION OF	ATTORNEY FOR	R DEBTOR		
1.	compensation pa	id to me within on	e year before	P. 2016(b), I certify the the filing of the petitr(s) in contemplation	ion in bankruptcy,	or agreed	to be paid to	me, for services
	For legal se	rvices, I have agr	eed to accept			\$1	,200.00	
	Prior to the	filing of this stater	ment I have re	eceived		\$1	,200.00	
	Balance Du	e					\$0.00	
2.	The source of the	compensation to b	be paid to me	was:				
	Debtor		Other (s	specify)				
3.	The source of con	npensation to be p	aid to me is:					
	Debtor		Other (s	specify)				
4.	☑ I have not agr of my law firm.	reed to share the a	above-disclose	ed compensation with	any other person	unless they	/ are membe	rs and associates
				ompensation with and with a list of the nar				
5.	In return for the a	bove-disclosed fee	e, I have agre	ed to render legal se	rvice for all aspect	s of the ban	kruptcy case	, including:
	<ul><li>a. Analysis of t bankruptcy;</li></ul>	he debtor' s finan	ncial situation,	and rendering advice	e to the debtor in	determining	g whether to	file a petition in
	• •	and filing of any pe	etition, schedul	les, statements of aff	airs and plan whic	h may be re	quired;	
	c. Representation	on of the debtor at	the meeting o	f creditors and confir	mation hearing, an	d any adjou	rned hearing	s thereof;
6.	By agreement with	h the debtor(s), the	e above-disclo	sed fee does not inc	lude the following s	services:		
					_			
				CERTIFICATIO	N			
	pa	•		complete statement of the debtor(s) in the		-	nent for	
	0.	4/03/2019		/s/ Erin Allene Dov	wns			
		ate		Signature of A				
				Downs Legal Serv	rices			
				Name of law fi	rm			

	nis information to	identify your case:					122A-1Supp:	only as directed in this for	mana im on
Debto	or 1	Mathew		Gerald					
		First Name	Middle Name	Last Name			1. There is n	o presumption of abuse.	
Debto (Spou	or 2 se, if filing)	Rachel First Name	Middle Name	Grinnell Last Name		_	abuse applie	lation to determine if a property will be made under Cha	apter 7 Mean
United	d States Bankrupt	cy Court for the:		Northern District	of Ohio			ation (Official Form 122A	•
Case (if know	number wn)							ns Test does not apply nov itary service but it could a	
Offic	ial Form	122A-1					Check if this	s is an amended filing	
		statement	of Your	Current	Monthly	' Inco	ome		12/
separate number nilitary :	e sheet to this for (if known). If you service, complete	rm. Include the line in believe that you are	number to which e exempted from of Exemption fr	n the additional inf n a presumption o rom Presumption	ormation applies f abuse because	. On the to	op of any additional ot have primarily co	curate. If more space is r I pages, write your name nsumer debts or becaus A-1Supp) with this form	e and case se of qualifyi
				,					
	-	al and filing status? Out Column A, lines	-						
	,	ır spouse is filing wit		th Columns A and	B, lines 2-11.				
	-	ır spouse is NOT filir	-						
		e same household a	•			and B, line	es 2-11.		
	penalty of p	rately or are legally so perjury that you and you asons that do not incli	our spouse are leg	gally separated und	er nonbankruptcy	law that ap	pplies or that you and	x, you declare under your spouse are living	
								e this bankruptcy case.1	
1 c	101(10A). For exaduring the 6 month	imple, if you are filing ones, add the income for	on September 15 r all 6 months and	5, the 6-month perio d divide the total by	d would be March 6. Fill in the result	1 through Do not ind nly. If you b	August 31. If the am clude any income am	ount of your monthly inco nount more than once. Fo t for any line, write \$0 in the Column B Debtor 2 or	me varied r example, if
1 c b	101(10A). For exa during the 6 month both spouses own ur gross wages, s	imple, if you are filing ones, add the income for	on September 15 r all 6 months and erty, put the incon	5, the 6-month perio d divide the total by ne from that properl	d would be March 6. Fill in the result by in one column o	1 through Do not ind nly. If you b	August 31. If the am clude any income am nave nothing to reportal column A	ount of your monthly inco nount more than once. Fo t for any line, write \$0 in the Column B	me varied r example, if
2. You pay	101(10A). For exa during the 6 month both spouses own ur gross wages, s yroll deductions).	ample, if you are filing hs, add the income for the same rental prop	on September 15 r all 6 months and erty, put the incon	5, the 6-month period divide the total by ne from that proper from that proper commissions (before	d would be March 6. Fill in the result by in one column o	1 through Do not inc nly. If you I	August 31. If the am clude any income am nave nothing to repor Column A Debtor 1	ount of your monthly inco nount more than once. Fo t for any line, write \$0 in the Column B Debtor 2 or non-filing spouse	me varied r example, if
2. You pay 3. Alin spo	during the 6 month both spouses own ur gross wages, s yroll deductions). mony and mainte buse. amounts from all pendents, include unmarried partner	ample, if you are filing ins, add the income for the same rental properties alary, tips, bonuses, enance payments if my source which are ding child support. In r, members of your hore.	on September 15 r all 6 months and erty, put the incon , overtime, and c  Column B is fille regularly paid for notude regular co pusehold, your dep	commissions (before the contributions from pendents, parents, parents, parents, and contributions from pendents, parents, and contributions parents, and contributions from pendents, parents, and contributions from pendents.	d would be March 6. Fill in the result by in one column of ore all e payments from a nses of you or you and roommates.	1 through Do not inc nly. If you I	August 31. If the am clude any income am nave nothing to repor column A Debtor 1 \$3,595.97	ount of your monthly inco count more than once. Fo t for any line, write \$0 in the Column B Debtor 2 or non-filing spouse	me varied r example, if
2. You pay 3. Aliii spo 4. Alli dej an Inc	during the 6 month ooth spouses own ur gross wages, syroll deductions).  mony and maintouse.  amounts from an apendents, include unmarried partner clude regular contryments you listed of the contract of the	ample, if you are filing ins, add the income for the same rental properties alary, tips, bonuses, enance payments if my source which are ding child support. In r, members of your hoributions from a spou on line 3.	on September 15 r all 6 months and erty, put the incon , overtime, and o  Column B is fille regularly paid for noclude regular co pusehold, your dep se only if Column	commissions (before the contributions from pendents, parents, parents, parents, and contributions from pendents, parents, and contributions parents, and contributions from pendents, parents, and contributions from pendents.	d would be March 6. Fill in the result by in one column of ore all e payments from a nses of you or you and roommates.	1 through Do not inc nly. If you I	August 31. If the am clude any income am nave nothing to repor column A Debtor 1 \$3,595.97	ount of your monthly inco count more than once. Fo t for any line, write \$0 in the Column B Debtor 2 or non-filing spouse	me varied r example, if
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Debtor 1	Mathew	
Debtor 2	Rachel	

Case number (if known) \_\_

	First Name Middle Name	e Last Name				
				Column A  Debtor 1	Column B  Debtor 2 or non-filing spouse	
8	. Unemployment compensation			\$0.00	\$0.00	
	Do not enter the amount if you contend that the	amount received was a be	enefit under			
	the Social Security Act. Instead, list it here:		↓			
	For you		\$0.00			
	For your spouse		\$0.00			
9	<ul> <li>Pension or retirement income. Do not include under the Social Security Act.</li> </ul>	e any amount received tha	at was a benefit	\$0.00	\$0.00	
10	<ol> <li>Income from all other sources not listed al Do not include any benefits received under the as a victim of a war crime, a crime against hu terrorism. If necessary, list other sources on a</li> </ol>	e Social Security Act or pa manity, or international or	ayments received domestic			
To	otal amounts from separate pages, if any.			+	+	
1	Calculate your total current monthly incom column. Then add the total for Column A to the column are column.		) for each	\$3,595.97	+ \$0.00	= \$3,595.97 Total current
	culate your current monthly income for the year.  Copy your total current monthly income from lire.				Copy line 11 here →	\$3,595.97
12a	Multiply by 12 (the number of months in a year				Copy line IT fiere →	x 12
12h	. The result is your annual income for this part o	•			401	
	culate the median family income that applies to		s:		12b	\$43,151.64
	in the state in which you live.	Ohio				
Fill i	in the number of people in your household.	3			_	
To f	in the median family income for your state and sizind a list of applicable median income amounts, or ructions for this form. This list may also be availa	go online using the link sp	ecified in the separ		13. <u> </u>	\$74,969.00
4. Hov	w do the lines compare?					
14a	<ul> <li>Line 12b is less than or equal to line 13. On t Go to Part 3.</li> </ul>	he top of page 1, check b	ox 1, There is no pr	esumption of abuse.		
14b	. Line 12b is more than line 13. On the top of p 3 and fill out Form 122A–2.	age 1, check box 2, <i>The p</i>	oresumption of abus	e is determined by Form	122A-2. Go to Part	
Part	3: Sign Below					
В	By signing here, I declare under penalty of perjury	that the information on th	is statement and in	any attachments is true a	nd correct.	
)	X /s/ Mathew Gerald		<b>X</b> /s/ F	Rachel Grinnell		
	Signature of Debtor 1	_	Sigi	nature of Debtor 2		
	Date 04/03/2019 MM/DD/YYYY		Date	04/03/2019 MM/DD/YYYY		
lf	you checked line 14a, do NOT fill out or file Form	n 122A–2.				
lf	you checked line 14b, fill out Form 122A-2 and f	file it with this form.				

Gerald Grinnell

Official Form 122A-1

# IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO CLEVELAND DIVISION

IN RE: Gerald, Mathew Grinnell, Rachel

CASE NO

CHAPTER 7

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereb	v verifies that the attached	I list of creditors is true and	correct to the best of his/her	knowledae.

Date	04/03/2019	Signature	/s/ Mathew Gerald	
		-	Mathew Gerald, Debtor	
Date	04/03/2019	Signature	/s/ Rachel Grinnell	
			Rachel Grinnell, Joint Debtor	

#### Acceptance Now

ATTN: AcceptanceNOW Customer Service / Bankruptcy 5501 Headquarters Dr Plano, TX 75024

American Credit Acce 961 E Main St Spartanburg, SC 29302

Capital One 15000 Capital One Dr Richmond, VA 23238

Credit Collection Services 725 Canton St. Norwood, MA 02062

#### Dfas-cl Indianapolis

Attn: Customer Service Dept 3300 8899 E 56 St Indianapolis, IN 46249

Diversified Consultants, Inc.

Attn: Bankruptcy PO Box 551268 Jacksonville, FL 32255

Dominion Energy Ohio PO Box 5759 Cleveland, OH 44101

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

#### First Federal Credit Control

Attn: Bankruptcy Attn: Bankruptcy 24700 Chagrin Blvd , Ste 205 Cleveland, OH 44122

#### Honor Finance 909 Davis Street Suite 260 Evanston, IL 60201

I C System Inc Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164

North American Recovery NAR, Inc PO Box 271014 Salt Lake City, UT 84127

Stuart-Lippman and Associates 5447 E. 5th Street Suite 110 Tucson, AZ 85711

The Illuminating Company 76 South Main Akron, OH 44308

U.S. Department of Education ECMC/Bankruptcy PO Box 16408 Saint Paul, MN 55116-0408

Waypoint Resource Group ATTN: Bankruptcy PO Box 1081 San Antonio, TX 78294 Westlake Portfolio Management P.O. Box 76809 Los Angeles, CA 90084